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## BIB DATA SHEET

CONFIRMATION NO. 9023

<b>SERIAL NUMBER</b> 10/788,475	<b>FILING or 371(c) DATE</b> 03/01/2004 <b>RULE</b>	<b>CLASS</b> 702	<b>GROUP ART UNIT</b> 3735	<b>ATTORNEY DOCKET NO.</b> 46058		
<b>APPLICANTS</b> Barry H. Ginsberg, Wyckoff, NJ; <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 05/25/2004						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /PATRICIA C Acknowledged MALLARI/ Examiner's signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> NJ	<b>SHEETS DRAWINGS</b> 8	<b>TOTAL CLAIMS</b> 62	<b>INDEPENDENT CLAIMS</b> 7	
<b>ADDRESS</b> ROYLANCE, ABRAMS, BERDO & GOODMAN, L.L.P. 1300 19TH STREET, N.W. SUITE 600 WASHINGTON., DC 20036 UNITED STATES						
<b>TITLE</b> System for determining insulin dose using carbohydrate to insulin ratio and insulin sensitivity factor						
<b>FILING FEE RECEIVED</b> 1870	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			